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ABSTRACT

As part of a project to understand the socioeconomic and health status of Hispanic elderly, assess their needs, and examine services available to and utilized by this group, 17 agencies in 9 states (Arizona, California, Connecticut, Florida, Michigan, Missouri, New York, Ohio, and Texas) were evaluated through the survey project. Results indicated the majority of clients served by these agencies had little or no formal education and nearly half spoke only Spanish and/or were literate only in Spanish. Nearly all clients were retired, many lived alone, and a significant percentage were disabled. The vast majority were low-income individuals and nearly three-fourths received Social Security benefits. Health care was cited as the most serious problem for clients, with lack of money, insufficient transportation, and language difficulties mentioned as the most serious barriers to adequate health care. Housing and transportation were also among the most serious unmet needs. Most agencies carried out some advocacy on behalf of their clients and half indicated that they were interested in serving as focus sites for further research and advocacy or leadership training. On average, federal funding accounted for 46% of the elderly program budgets, state government for 18%, local government for 21%, and United Way for 11%. (NEC)

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# PROJECT ANCIANOS

## SURVEY OF PROJECTS FOR THE HISPANIC ELDERLY

## INITIAL FINDINGS

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PROJECT ANCIANOS

SURVEY OF PROJECTS FOR THE HISPANIC ELDERLY

INITIAL FINDINGS

## I. INTRODUCTION AND SUMMARY

The National Council of La Raza is carrying out an applied research and analysis effort to understand the socioeconomic and health status of Hispanic elderly, to assess the needs, and to examine the services available to and utilized by this group. The research project, Project Ancianos, is funded jointly by The Travelers Companies Foundation and the Villers Foundation.

One part of Project Ancianos is a survey distributed among Hispanic organizations in the Council's network which run programs for the Hispanic in elderly. The questionnaire asked the agencies to discuss their existing services for and the characteristics of the clients of the programs. The responses as discussed in this report, along with Census and other statistical data, will provide the basis for a substantive analysis of the economic and health status of Hispanic elderly in the United States, and the ability of existing institutions to meet their needs. Based on the initial information provided in the survey responses, several affiliates of the National Council of La Raza who provide services to the elderly will be selected for more in-depth project involvement, including case studies of their programs. In addition to the following presentation of study findings, the data will be used in training sessions to prepare groups of elderly to take a leadership role in making their needs known to policy makers and program administrators.

A total of 23 surveys were distributed to agencies across the country. Sixteen of these agencies completed the survey; one agency filled out a separate survey for each of two elderly programs it operates. As described in the following report, programs varied widely in terms of budget, number of clients served, programs offered, and other areas. Some trends were evident, however, in certain service areas and client characteristics.

The majority of clients served by these agencies have little or no formal education, and nearly half speak only Spanish and/or are literate only in Spanish. Nearly all clients are retired and a significant percentage are disabled. The vast majority are low-income individuals, and nearly three-fourths receive Social Security benefits. Health care was cited as the most serious problem for the clients, with lack of money, insufficient transportation and language difficulties mentioned as the most serious barriers to adequate health care. Housing and transportation were also among the most serious unmet needs of the Hispanic elderly clientele. Most agencies carry out some advocacy on behalf of their elderly clients and half of them indicated that they are interested in serving as focus sites for further research and advocacy or leadership training.

The clients in these programs were less likely than Hispanic elderly overall to live with other family members, and very few are institutionalized. They appear to represent the subgroup among the Hispanic elderly who are most

likely to look to a community-based group or other agency for the services they need, as distinguished from those who live with family members and therefore require less assistance from outside support systems. The information from the survey reflects the characteristics of this segment of the population.

## II. PROGRAM CHARACTERISTICS

### A. Programs

A total of 17 programs from nine states were evaluated through the survey project. The states represented by the agencies were: Arizona, California, Michigan, Missouri, Ohio, and Texas, with a predominantly Mexican American client population; Connecticut and New York, with a predominantly Puerto Rican client population; and Florida, with a predominantly Cuban client population (See attached list of agencies surveyed).

### B. Budget

Some agencies operate programs for the elderly without special funding. Though surveys were completed for 17 programs, only 13 of these indicated that they have specific budgets for elderly services; the remaining four have no separate funding for elderly programs, but they do serve elderly clientele in their general programs. The average 1987 budget for the agencies with separate budgets for elderly programs is $851,151. Amounts range from $10,000 for Fiscal Year 1987 at the Harlingen Information Social Services Organization (Harlingen, Texas), to $3.5 million at both the Institute for Puerto Rican/Hispanic Elderly (New York City) and Amigos del Valle (McAllen, Texas).

Most funding for elderly programs comes from the federal government; private-sector funding is very limited. On average, federal funding accounts for 46% of the elderly program budgets, state government for 18%, local government for 21%, corporations for 1%, foundations for 4%, special events for 1%, and other sources (primarily United Way) for 11%. The latter figure includes one agency that reported 100% of its elderly program is funded by United Way.

Recent budget cuts have hurt these programs. When asked whether federal or other budget cuts have affected the agency's programs for the elderly, all the agencies with separate elderly program budgets stated that their programs have been negatively affected by budget cuts either at the federal or the local level. Many cited problems related to curtailment of support services, cutbacks in meals/nutrition programs and the need to secure alternative sources of funding to make up for federal and municipal cuts.

### C. Services Offered by Agencies

Social services, education services, and transportation assistance are the most common types of services offered by the agencies. Given a list of ten

categories, the agencies were asked to identify which of these services they offer to their elderly clientele. Of the agencies responding to this question, 88% provide social services; 69% provide education services; 69% provide transportation assistance; 62% provide meals; 63% provide recreational activities; 56% provide emergency services; 38% provide housing assistance; 25% provide health services; 25% provide employment services; and 25% provide other services, including translation services, housekeeping services, "personal assistance," psychiatric treatment, referrals, and home care.

Programs vary greatly in size. The average number of elderly clients served on a daily basis is 605, while the median number of clients is 92. These figures are derived from a wide range of programs. At one extreme, the San Juan Center in Hartford, Connecticut reported a daily caseload of 20 to 30 clients. At the other extreme, Amigos del Valle in McAllen, Texas, reported a typical daily caseload of 3,500 clients.

## III. CLIENT CHARACTERISTICS

### A. Introduction

Agencies were asked a number of questions regarding client characteristics, such as national origin, living situations, educational background, and others. Though some were unable to provide specific data on each of the questions, significant insight into the Hispanic elderly population served by Hispanic community groups is offered by the information which agencies were able to provide. Though averages were calculated using responses from all agencies responding to the questions, certain client characteristics varied significantly depending on the region of the country in which the agency is located. Ten of the agencies responding represent areas of high Mexican-American concentration (West, Southwest); four agencies are in the Midwest, also with a high Mexican-American concentration; two are in the Northeast, serving a predominantly Puerto Rican community; and one is in Florida, with a large Cuban population.

### B. National Origin and Citizenship or Residency Status

Overall, Mexican Americans comprise the large majority -- 62% -- of the elderly clients served by the agencies; 12% are Puerto Rican; 7% are Cuban; 2% are Central American; 1% are South American; 4% are classified as "other Hispanic;" and 14% are non-Hispanic. Among these clients, 8% are recent immigrants or migrants to the mainland from Puerto Rico; 59% are longer-term residents -- immigrants who have lived in the mainland United States continuously for five or more years; 33% were born in the mainland United States; and 14% were born in Puerto Rico (the figures add to more than 100% because some Puerto Ricans are counted as both native-born from Puerto Rico and either recent migrants or long-term residents on the mainland).

C. Living Arrangements

By far the most common living situation among clients served by the agencies surveyed is an individual living alone. This is followed at a distant second by individuals living with spouses only. A very small minority were reported to be living in nursing homes or health or mental health institutions. On the average, elderly individuals living alone constitute 72% of clients served, 16% live with spouses only, 6% live with their children, 2% live with children and their spouse, 2% live in a group or retirement home, less than 1% live in a nursing home or health or mental health institution; and only 0.1% were reported to live in some other situation ("with other relatives" was specified in this instance). Naturally, institutionalized elderly are unlikely to be coming to community-based centers. Also, the large proportion of individuals living alone, and the correspondingly small group living with spouses and/or children, may be explained by the assumption that these clients turn to the agencies for services because they are less likely to have a familial support system on which they may depend for assistance.

D. Educational Background and Language Skills

Slightly over half of all clients served by these agencies were reported to have little or no formal education (defined as having completed 0 - 5 years of school); another 37% of the elderly clients have fewer than four years of high school (6 - 11 years of school). Just 9% have a high school diploma, and 2% have some education beyond high school.

The largest percentage of clients are literate only in Spanish, and speak only Spanish as well. Agencies were asked to describe the literacy levels of clients to the best of their knowledge. Agencies indicated that 23% of their clients are literate in English only; 47% are literate in Spanish only; 17% are literate in both English and Spanish; and 13% are literate in neither. Agencies were also asked to describe the spoken language skills of their clients. According to the survey responses, the largest percentage of clients -- 47% -- speak only Spanish. Clients who speak only English constitute 20% of all clients; 9% are fluent in both English and Spanish; 1% are fluent in English, but speak some Spanish; 21% are fluent in Spanish, but speak some English; and 3% speak some English and some Spanish. About half of all clients speak at least some English.

Nearly all agencies (88%) said that language presents a significant barrier for their clients in obtaining jobs and services. Only 6% said that language does not present a significant barrier and 6% said they were not sure.

E. Occupational and Economic Status of Clients

As expected, the vast majority of elderly clients served by the agencies are retired. A significant number of clients are also disabled and a small percentage are working part-time. About 91% of the clients are retired (this

figure includes a small percentage of clients whom agencies described as homemakers). Slightly over 2% are working part-time, less than 1% are working full-time, less than 1% are temporarily unemployed, 2% were described as long-term unemployed, and 8% are disabled. Four agencies did not report percentage breakdowns for the occupational status of their clients, but indicated that all clients are either retired, working part-time and/or disabled.

Laborers or other unskilled workers form the majority of those who are employed in some capacity. About 70% of the agencies said that clients who work hold jobs as laborers or other unskilled positions; 50% reported that working clients hold jobs as operatives or other semi-skilled positions; 10% indicated that clients hold jobs as skilled workers or technicians; 10% said that clients have "other white-collar" jobs; 10% reported that clients hold "other blue-collar" jobs; and 10% said clients hold jobs in some "other" category (most often as migrant and seasonal farmworkers).

The great majority of clients -- 86% -- are "low-income;" 10% have limited incomes, but remain above the poverty level; and 4% may be classified in the mid or upper-income bracket.

On average, 74% of clients receive Social Security benefits. Nearly half (43%) receive Supplemental Security Income (SSI). Approximately 3% receive Old Age, Survivors, and Disability Insurance (OASDI) benefits, and 6% receive some other pension. With regard to non-cash benefits, agencies reported that 47% of clients receive Medicaid; 78% receive Medicare; 31% have some sort of public housing or receive other housing assistance; 28% receive food stamps; and 4% receive some other type of non-cash benefits.

## IV. SERVICE NEEDS

### A. Introduction

Perhaps the most critical issue addressed through this survey is the service needs of the Hispanic elderly. Agencies were asked questions regarding specific service needs and problems faced by their elderly clients and the degree to which these needs or problems are addressed.

To begin, agencies reported that approximately 50% of all elderly clients receive services on a daily basis. Fewer clients, 27%, receive services several times per week; 16% of all clients receive services once per week; and 8% receive services less than once per week.

### B. Housing and Transportation

Asked to identify major client problems, more than two-thirds of agencies reported that housing is a significant problem for their clients; 33% said that it is an extremely serious problem, 36% said that it is a serious problem, 30% a

somewhat serious problem, and 7% a minor problem. No agency said that housing is not a problem for their clients.

Transportation is also a serious problem for the Hispanic elderly. The agencies indicated that over 50% of all clients need transportation assistance on a regular basis. Just 20% said that the transportation needs of clients are fully met, 60% said that these needs are only partially met, and 20% indicated that the needs are not met. Several indicated that transportation for the elderly is offered by municipally-operated systems, or that senior citizen fare discount programs provide some assistance. Others said that their agency provides limited transportation assistance through their own vehicles and staff resources. One agency mentioned that their elderly clients rely on family members to provide transportation.

C. Health

With regard to health care, agencies indicated that only 35% of their clients have access to affordable health care. Money was mentioned most frequently as the most severe barrier to adequate health care. Distance to facilities (transportation) and language also appear to present severe barriers. Among the other less serious obstacles mentioned were the lack of availability of health services, cultural biases of both clients and staff, and lack of knowledge or help in gaining access to adequate care.

The most prevalent health problem among clients at the agencies is reportedly diabetes. This disease was mentioned by 57% of the agencies as one of the three most prevalent health problems among clients. High blood pressure is also a very serious health problem, with half of agencies citing it as one of the most prevalent. Slightly over one-third of the agencies mentioned arthritis and 32% mentioned heart disease as one of the three most prevalent health problems among clients; visual impairment and dental problems followed, with 14% of agencies describing each of these. Hearing impairment was mentioned very frequently by the agencies as a problem among their clients, but none mentioned it as one of the three most prevalent ailments. Headaches, kidney disease and mental disorders were also mentioned by several agencies as ailments often faced by clients.

D. Meeting Clients' Needs

As mentioned earlier, agencies participating in the survey offer a wide range of services for their elderly clientele. However, they cannot meet all the service needs of these elderly individuals. We asked these agencies to name the services that clients receive from other sources. Given the seriousness of health problems among the clients, it is not surprising to discover that 86% of agencies say that clients turn to outside sources for health care. In addition, 71% said clients turn to other sources for transportation assistance, 64% for emergency assistance, and 57% for housing assistance. Additional services which clients seek from other sources, to a lesser degree, include meals, employment services,

education, social services, recreational services, emergency shelter and food, and major home repairs.

Elderly clients may rely on a variety of support structures to meet their needs. Hospitals and clinics were mentioned most frequently (by 88% of agencies reporting) as the support structure to which clients turn for help. This is consistent with the relatively low proportion (25%) of agencies that provide health care for their clients, while almost all clients require some form of health care. Over 76% of the agencies indicated that clients turn to government agencies, nearly 65% mentioned local churches or church-related agencies, and over 58% mentioned other private community-based groups. With regard to informal support systems, relatives were mentioned most frequently by agencies as a source of support, and friends were mentioned nearly as often.

Health care is considered to be the most serious unmet need among the Hispanic elderly served by the agencies. Affordable housing was mentioned second, and transportation third. Food and nutrition-related needs were mentioned next. Bilingual programs and staff in institutions serving the elderly, income assistance, and home care were each mentioned by more than one agency as major unmet needs. Other unmet needs mentioned once each included: day care, security against crime, advocacy for and by seniors, "ongoing support systems," funding for elderly organizations, major home repair, "socialization" and recreational services, general services to rural elderly, and social services.

### E. Advocacy on Behalf of Hispanic Elderly

An important aspect of meeting the needs of the Hispanic elderly is the extent to which agencies and the elderly themselves are able to make these needs known to policy makers and program administrators and to pressure such individuals and institutions to take appropriate action. Three-fourths of the agencies responding to the questionnaire indicated that they do carry out advocacy on behalf of the elderly at various levels of government. Advocacy activities include participation in public hearings and workshops on issues relevent to their clientele, letter-writing to elected officials, and fund-raising campaigns, among others. It appears that a good deal of the advocacy activity is carried out by agency board members and executives, rather than by the elderly themselves. Only 31% of the agencies indicated that they provide any kind of advocacy or leadership training for their elderly clients. Half the agencies indicated they are interested in serving as a focus site for further research and advocacy or leadership training.

## IV. CONCLUSION

Hispanic elderly clientele served by agencies in their communities appear to be representative of the general Hispanic elderly population in terms of national origin, educational background, language and literacy skills, receipt of Social Security benefits, and health status. However, the group represented in

this survey differs significantly from the general Hispanic elderly population in terms of living arrangements, with a much higher proportion living alone; in poverty status, with a higher percentage below poverty; and in occupational status, with a higher percentage retired or no longer in the labor force.

A wide variety of programs serve these elderly individuals, some offering a very comprehensive array of services, others more limited and focused services. If one thing has been made clear through the data presented in the survey, it is that the needs of Hispanic elderly are very great and in many cases the resources available to meet these needs fall far short of the demand. The needs of Hispanic elderly will continue to grow as this population continues to expand at a very rapid pace. Through Project Ancianos, the National Council of La Raza is exploring the characteristics and service needs of the Hispanic elderly and hopes to help make these needs known to policy makers, program administrators and others who can make a difference in improving the life situations of Hispanic elderly. The project will provide specific information and training to groups of Hispanic elderly, so they can take a more active role in making their needs known.

PROJECT ANCIANOS

AGENCIES PARTICIPATING IN SURVEY OF PROJECTS SERVING THE HISPANIC ELDERLY

I. PREDOMINANTLY MEXICAN AMERICAN CLIENTS

CHICANOS POR LA CAUSA
Phoenix, Arizona

EL CONCILIO DE MADERA, INC.
Madera, California

LA FAMILIA COUNSELING SERVICE
Hayward, California

EL CENTRO HUMAN SERVICES CORP.
Los Angeles, California

SPANISH SPEAKING UNITY COUNCIL
A. Posada de Colores
B. Fruitvale Senior Center
Oakland, California

SAN DIEGO CHICANO FEDERATION
San Diego, California

LATIN AMERICAN SOCIAL AND ECONOMIC DEVELOPMENT
(LASED)
Detroit, Michigan

MICHIGAN ECONOMICS FOR HUMAN DEVELOPMENT
Lansing, Michigan

GUADALUPE CENTER, INC.
Kansas City, Missouri

EL CENTRO DE SERVICIOS SOCIALES
Lorain, Ohio

AMIGOS DEL VALLE
McAllen, Texas

MEXICAN AMERICAN UNITY COUNCIL
San Antonio, Texas

HARLINGEN INFORMATION SOCIAL SERVICES ORGANIZATION
Harlingen, Texas

II. PREDOMINANTLY PUERTO RICAN CLIENTS

SAN JUAN CENTER, INC.
Hartford, Connecticut

INSTITUTE FOR THE PUERTO RICAN/HISPANIC ELDERLY
New York, New York

III. PREDOMINANTLY CUBAN CLIENTS

LITTLE HAVANA ACTIVITIES CENTER
Miami, Florida